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| COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY CONTINUED (include reference to PCT International Applications) PCT/FR99/00240 | | ATTORNEY'S DOCKET NO RN98026 | |
| I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application: | | | |
| PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120 | | | |
| U.S. APPLICATIONS | | STATUS (CHECK ONE) | |
| U.S. APPLICATION NUMBER | U.S. FILING DATE | PATENTED | PENDING |
| _____ | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| PCT APPLICATIONS DESIGNATING THE U.S. | | | |
| PCT APPLICATION NO | PCT FILING DATE | US SERIAL NUMBERS ASSIGNED (if any) | |
| _____ | _____ | _____ | |
| POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney's and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number) JOHN A. SHEDDEN - Reg. No. 25,844. JOHN D. WOOD - Reg. No. 31,148 JEAN-LOUIS SEUGNET - Limited Recognition under 37 CFR § 10.9(b) enclosed | | | |
| Send Correspondence to: JEAN-LOUIS SEUGNET INTELLECTUAL PROPERTY DEPT. RHODIA INC. 259 PROSPECT PLAINS ROAD, CN 7500, CRANBURY, NJ 08512-7500 | | Direct Telephone Calls to: <small>(name and telephone number)</small> JEAN-LOUIS SEUGNET (609) 860-4180 | |
| 201 | FULL NAME OF INVENTOR AMICHE | FAMILY NAME Frédéric | STATE OR FOREIGN COUNTRY FRANCE FRX |
| | RESIDENCE & CITIZENSHIP AULNAY-SOUS-BOIS | CITY FRANCE | COUNTRY OF CITIZENSHIP FRANCE |
| | POST OFFICE ADDRESS 4, Ave. du Gros Peuplier | CITY AULNAY-SOUS-BOIS | STATE & ZIP CODE/COUNTRY F-93600, FRANCE |
| 202 | FULL NAME OF INVENTOR BOMAL | FAMILY NAME Yves | STATE OR FOREIGN COUNTRY FRANCE FRX |
| | RESIDENCE & CITIZENSHIP PARIS | CITY FRANCE | COUNTRY OF CITIZENSHIP BELGIUM |
| | POST OFFICE ADDRESS 43, rue Duhesme | CITY PARIS | STATE & ZIP CODE/COUNTRY F-75018, FRANCE |
| 203 | FULL NAME OF INVENTOR LADOUCE | FAMILY NAME Laurence | STATE OR FOREIGN COUNTRY FRANCE FRX |
| | RESIDENCE & CITIZENSHIP PARIS | CITY FRANCE | COUNTRY OF CITIZENSHIP FRANCE |
| | POST OFFICE ADDRESS 112 Ave. du Général Michel Bizot | CITY PARIS | STATE & ZIP CODE/COUNTRY F-75012 FRANCE |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. | | | |
| SIGNATURE OF INVENTOR 201 | | SIGNATURE OF INVENTOR 202 | |
| _____ | | _____ | |
| DATE | DATE | DATE | |
| 11/05/2000 | September 17 th 2000 | September 25 th 2000 | |

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(include Reference to PCT International Applications) PCT/FR99/00240ATTORNEY'S DOCKET NO
RN98026

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMBINATION BASED ON MICROFIBRILS AND MINERAL PARTICLES,
PREPARATION AND USES**

the specification of which (check only one item below):

☐ is attached hereto.☐ was filed as United States application

Serial No. _____

on _____

and was amended

on _____ (if applicable)

☒ was filed as PCT international applicationNumber PCT/ FR99/00240on February 4, 1999

and amended under PCT ARTICLE 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations. §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

| COUNTRY PCT indicate PCT | APPLICATION NUMBER | DATE OF FILING (day month year) | PRIORITY CLAIMED UNDER 35 USC 119 | |
|-----------------------------|--------------------|------------------------------------|---|-----------------------------|
| FRANCE | 98/01805 | 11 February 1998 | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES | <input type="checkbox"/> NO |